



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

March 13, 2015

Edith Lopez
8232 Harbach Blvd
Apt 83
Clive, IA 50325

Dear Child Care Provider,

This letter is in regards to the March 12, 2015 compliance check of your Level A, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.5(1)a Numbers for police, fire, ambulance, poison information posted by phone.

Please use the form on page 29 of the packet provided to you at the time of your spot check. This form will assist you in organizing your phone contacts and emergency numbers. Please post this form in an easily accessible location.

☐ 110.5(1)a Numbers for each child's parent, physician, and a responsible person are accessible by the phone.

Please use the form on page 29 of the packet provided to you at the time of your spot check. This form will assist you in organizing your phone contacts and emergency numbers. Please post this form in an easily accessible location.

☐ 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits.

Please create a map of your home's floor plan which includes mapping as well as written instructions on what to do and where to go in the event of a fire or tornado. You can refer to page 12 of the packet for an example. You may be able to access your floor plan through the Polk County Assessor's website listed at the bottom of the page or your landlord may be able to provide you with a copy of your apartments floor plan.

☐ 110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.

☐ 110.5(1)m Has not less than one 2A 10BC rated fire extinguisher in a visible and readily accessible place on each child-occupied floor.

1305 E. Walnut Street, Des Moines, IA 50319-0114

The pressure was low at the time of the spot check and the gauge indicated your extinguisher is empty. You will need to replace or refill the device. Extinguishers can be purchased at any local wal-mart, Menards, Lowes, etc. You can also contact the fire department to see about getting your current extinguisher refilled.

☐ 110.5(2) A provider file is maintained and contains:

☐ 110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated every two years.

If you have had a current physical please contact your doctor to complete the forms on pages 24 and 25 of the packet provided. Keep this form on file in your provider records and have it available for easy access at all times. If you need to schedule an appointment, please do so as soon as possible and take the forms on pages 24 and 25 with you to the doctor for completion. These forms are good for a period of three years.

☐ 110.5(2)b Certificates or training verification documentation for:

☐ 110.5(2)b Within the first three months of registration:

☐ 110.5(2)b Certification by an approved trainer/organization in infant and child first-aid that includes mouth-to-mouth resuscitation. Certification will be maintained throughout period of registration. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR.

Your current CPR course expired in April 2014 and needs to be renewed. You reported you are aware of where you can get a class completed.

☐ 110.5(4) The certificate of registration is displayed in a conspicuous place.

I have included a copy of your registration certificate for your convenience in this mailing. Please hang this certificate in your home in a visible location.

☐ 110.5(8) Children's Files

☐ 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains:

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

You can request from the parent. You can also provide the parent with the document on page 4 of the packet provided to you to assist in meeting this requirement.

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.

Request from parent.

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☐ Based on the items out of compliance listed above, you will be required to have a recheck or follow up visit to your home. This visit will occur after the 45 day time period has elapsed.

x☐ Based on the items out of compliance listed above, a recheck or follow up visit to your home is **NOT** necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.

Please sign and date below, and return this form in the provided envelope by: April 30, 2015.

X _____
Signature Date

Please do not hesitate to contact me at DHS at 515-993-1742 or mcrawfo@dhs.state.ia.us if you have any questions regarding this letter.

Sincerely,

Melissa Crawford
Melissa Crawford
Social Worker II

C. Mark Chappelle
Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-800-722-7619.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).

What other meds have been tried.

Prozac – minimal improvement in mood on Prozac

Lexapro – became gamey, inattentive and assaultive

These are both SSRI antidepressants specifically to treat depression. A third SSRI as not tried.

Nortriptyline is a tricyclic antidepressant. It is not as effective in treating depression as the SSRI's and is not being ordered at this time for depression. It is being ordered to help with anxiety and is to be given at bedtime to help with sleep.